

STATEWIDE HEALTH INFORMATION EXCHANGE POLICY BOARD

December 8, 2009

MEETING MINUTES

Policy Board Members in Attendance √, Absent x, Representative *:

√ Doug Abel	x Thomas Green	√ John Nugent
√ Salliann Alborn	√ Shannah Koss	x Kurt Olsen
√ Cindy Boersma	√ Peggy Leonard	x Chris Shea
√ Lee Cotton	√ Carey Leverett	* John Shematek
√ Damien Doyle	√ Tom Lewis	√ Liza Solomon
√ Brian England	√ Ellen Maltz	x Sarah Tucker
√ Gene Gary-Williams	x Tekedra McGee Jefferson	x Marceline White

Ex-Officio Members

√ Scott Afzal	√ David Horrocks	√ Tricia Roddy
√ Rex Cowdry	* Steve Ports	√ David Sharp
√ Cindy Friend		

- * Beverly Collins representing Jon Shematek
- * Diana Feeney representing Steve Ports

Additional Participants

√ Cheryl Jones	√ Sheila Higdon	√ Kathy Francis
√ Jim Weiland	√ Sarah Posner	

Approval of the Minutes

As this was the first meeting of the Policy Board, there were no minutes for approval.

I. Meeting Call to Order

Rex Cowdry called the meeting to order at 2:00 p.m. and provided some opening remarks.

II. Introductions

The Policy Board members and others in attendance introduced themselves and gave a brief background of the organization they represent. As part of the discussion, several members suggested staff invite representatives from mental health and substance abuse areas of health care to participate on the Policy Board. Members were encouraged to send any additional representative names to Rex Cowdry or David Sharp.

III. Review Policy Board Objectives

Rex Cowdry provided some background information about the Policy Board and its formation, along with the tasks and goals of the Policy Board. The responsibility of this Policy Board includes, although is not limited to, the development of policies for privacy and security which the MHCC will adopt and the statewide health information exchange (HIE) will implement.

IV. Prior Health Information Exchange Initiatives

David Sharp provided a brief overview of key health information technology (HIT) initiatives over the last several years in preparation for a statewide HIE. As part of the discussion, members were encouraged to refer to the HIT policy reports listed on the MHCC website under the Statewide Health Information Exchange Policy Board link. David Sharp provided the background for the appointment of the Chesapeake Regional Information System for our Patients (CRISP), the multi-stakeholder group designated by the MHCC. Initial funding of \$10 million has been awarded by HSCRC through its unique hospital all-payor rate setting system.

Rex Cowdry discussed funding two grant opportunities where applications for funding had been submitted to the Office of the National Coordinator for Health Information Technology (ONC). The two grants for HIE funding were released by ONC at the end of August as part of the *American Recovery and Reinvestment Act of 2009* (ARRA) will provide incentive funding to physicians in adopting electronic health records (EHRs) and support efforts to achieve widespread and sustainable HIE through the meaningful use of certified EHRs. The MHCC has applied for the *State Health Information Exchange Cooperative Agreement Program*, which can provide up to \$9 million to Maryland in building the statewide HIE. CRISP applied for the *Health Information Technology Extension Program: Regional Centers Cooperative Agreement Program* grant that may award around \$5 million for education, outreach, and technical assistance.

Rex Cowdry reported that the MHCC is taking the lead in developing a HIT planning grant application for Maryland Medical Assistance. The Centers for Medicare and Medicaid Services will fund successful applicants between \$1-5 million to develop a State Medicaid Health Information Technology plan and will provide states with additional funding for implementation.

V. CRISP Overview and Policy Board Discussion

David Horrocks, President of CRISP, provided an overview of their organizational structure and discussed the history of collaboration between the founding members: The Erickson Foundation, MedStar Health, Johns Hopkins University, and University of Maryland Medical Systems. David Horrocks discussed the role of the Advisory Committees and reviewed the technical infrastructure and early Use Cases. As part of the discussion, David Horrocks identified several areas for policy development that CRISP would look to the Policy Board for guidance.

Rex Cowdry reviewed a policy issues outline that listed leading policies for discussion by the Policy Board. Members were asked to review the items and to volunteer to be part of a discussion group that would prioritize the list of policies for consideration at the January Policy Board meeting. Cindy Friend will coordinate the identification of members for the discussion group, scheduling of a conference call, and provide participants with logistical information. The discussion group will sort through some of the details of the policies and bring recommendations back to the larger group for consideration.

VI. Closing Remarks

Rex Cowdry thanked the members for their willingness to take part on the Policy Board that will develop policies critical to operation of the statewide HIE. Several members requested alternating the meeting location site. David Sharp advised members of the next meeting scheduled for January 19, 2010 at 2:00 p.m. The location for the next meeting will be the Community Health Integrated Partnership at to 802 Cromwell Park Drive, Suite V, Glen Burnie, MD 21061. There being no further business, the meeting was adjourned at 4:00 p.m.